

ARTHRITIS: REDUCING THE BURDEN AND IMPROVING THE QUALITY OF LIFE

WHAT IS THE PUBLIC HEALTH PROBLEM?

- Arthritis and/or chronic joint symptoms affect almost 70 million Americans--nearly 1 of every 3 adults--making it among the most common health problems in the United States.
- Arthritis is the most frequent cause of disability in America; more than 7 million citizens are limited in some way because of arthritis.
- Arthritis is costly to society and individuals. In 1995, Arthritis cost more than \$22 billion in direct medical costs and over \$82 billion in total costs, according to the American Academy of Orthopedic Surgeons.
- Effective interventions exist, but are underutilized.

WHAT HAS CDC ACCOMPLISHED?

The primary goal of CDC's arthritis program is to improve the quality of life of people affected by arthritis; in 2002, 36 states were funded by CDC to work toward this goal. These CDC-funded states are building arthritis programs, developing action plans with their partners, and conducting pilot projects to improve the quality of life among people affected by arthritis. Many states are increasing the availability of the Arthritis Self Help Course (a self management education program that has been shown to decrease pain and reduce the number of physician visits) and physical activity programs so more people can be reached. CDC is also working with state health departments and the Arthritis Foundation to implement a health communications campaign that promotes physical activity among people with arthritis aged 45-64 in lower socioeconomic levels. The campaign consists of taped radio spots, radio scripts, brochures, and print pieces with the theme line "Physical Activity: The Arthritis Pain Reliever." This campaign was rolled out January 2003. In addition, CDC supports research to better determine why arthritis occurs and progresses, and to find the best strategies for dealing with it.

Example of program in action: With CDC support, California is enhancing efforts to address arthritis among diverse populations. For example, to reach Hispanic farm and transient workers, the California State Health Department worked with the Southern California Chapter of the Arthritis Foundation to disseminate a Spanish language version of the Arthritis Self-Help Course. Hispanic people participating in the course have reported improvements in their general health, sleep, depression, and activities of daily living. The program sponsors are expanding this successful program to other undeserved areas.

WHAT ARE THE NEXT STEPS?

CDC will work with funded states and its national partners to increase the number of people reached by existing arthritis programs and to develop and evaluate culturally appropriate programs to better serve diverse populations. CDC will conduct critically needed prevention research to develop and evaluate intervention programs and other strategies that help people better manage their symptoms and improve their quality of life.

For more information on this and other CDC programs, visit www.cdc.gov/programs.

February 2003